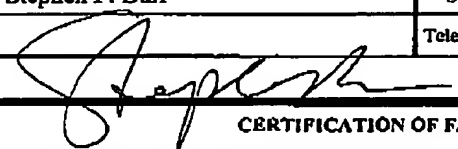
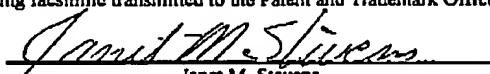


<b>TRANSMITTAL FORM</b> (Provisions of 37 CFR 1.136 Apply)						
Application Number	09/819,330		Filing Date	March 28, 2001		
Group Art Unit	2839		Examiner Name	Tulsidas C. Patel		
Confirmation No.	4237		Attorney Docket No.	939_023		
Inventor(s)	Akira MATSUMOTO and Masashi FUKUYAMA					
Invention:	OPTICAL FIBER ARRAY					
Transmitted herewith is a Request for Reconsideration in the above-identified application. The fee has been calculated as follows:						
<b>CLAIMS</b>						
(1)	(2) Claims Remaining	(3)	(4) Highest Number Previously Paid	(5) No. of Extra Claims Present	(6) Rate (Large Entity)	(7) Additional Fee
TOTAL CLAIMS	17	MINUS	20	0	\$18.00	\$00.00
INDEP. CLAIMS	2	MINUS	3	0	\$86.00	\$00.00
<b>TOTAL ADDITIONAL FEE</b>						\$00.00
<b>EXTENSION OF TERM</b>						
<input type="checkbox"/> Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.						
<input checked="" type="checkbox"/> This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application. The requested extension and appropriate non-small entity fee are as follows:						
<input type="checkbox"/> One Month (37 CFR 1.17(a)(1)) .....					\$110.00	
<input checked="" type="checkbox"/> Two Month (37 CFR 1.17(a)(2)) .....					\$420.00	420.00
<input type="checkbox"/> Three Month (37 CFR 1.17(a)(3)) .....					\$950.00	
<b>TOTAL FEES DUE</b>						420.00
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount is reduced by one-half, and the resulting fee is:						
<b>FEE PAYMENT</b>						
<input type="checkbox"/> No additional fee is required.						
<input type="checkbox"/> A check in the amount of \$_____ is enclosed.						
<input checked="" type="checkbox"/> Charge Deposit Account 50-1446 in the amount of \$420.00. Enclosed is a duplicate copy of this sheet.						
<input checked="" type="checkbox"/> Please charge any fees which may be required, or credit any overpayment, to Deposit Account 50-1446.						
<b>Submitted By:</b>						
Name (Print Type)	Stephen P. Burr		Reg. No.	32,970	Customer No.	025191
			Telephone	(315) 233-8300	Facsimile	(315) 233-8320
Signature					Date	May 21, 2004
<b>CERTIFICATION OF FACSIMILE TRANSMISSION</b>						
I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on May 21, 2004 at 703-872-9306.						
 Janet M. Stevens						